Disclosure Rep	ort Cover			A	mendment Yes No
	ral report and committee ir	nformation, must be	signed and subi	mitted along with oth	
Do not use this form to	update information				
1. Committee Inform	ation				
a. Full Name					c. ID Number
Lee Henage for Board	ofEducation	R	ECEIV		LH41516
b. Mailing Address (includ	e City, State and Zip Code)				d. Date Filed
3859 Lancaster Hwy Monroe, NC 28112		OCT 3 1 201	16	10/31/16	
	Union (Co. Board of Ele	ections	e. Phone Number	
					704-290-8339
2. Report Year 3	. Period Start Date (mm/d	d/yy) 4. Period I (mm/dd/yy)	End Date	5. Treasurer Full I	
2016	07/01/16	10/	22/16	Lee Gardner Henag	ge
6. Type of Committee	(Check One)	9. Type of Report	(check on	ly one type of report f	rom one category)
Candidate Campaig	n 🔲 Party	Municipal	State/Co	•	Referendum
PAC	Referendum	Organizational	(Organizational	Organizational
Independent Expenditure Legal Expense Fund	Joint Fundraiser	Thirty-five day	,	Quarterly	Pre-referendum
The Control of the Co	(if applicable, check one)	Pre-primary		First	Final
Booster Fund"		Pre-election		Second	Supplemental Final
Building Fund		Pre-runoff	\boxtimes	Third	Annual
		Semi-annual		Fourth	Special
		Mid Year		Semi-annual	
Other:		Year End	1 ≓	Mid Year	10. Special Report Name
0 M 3 0 0 0		Final Special		Year End	
8. Number of Fundra	isers this Report	Special		Final Special	
11. Account Informat	ion		11. Account I	nformation	
a. Financial Institution Fu	ll Name		a. Financial Inst	itution Full Name	
Wells Fargo					
b. Purpose	c. Account Code		b. Purpose		c. Account Code
Checking	1				
Account for Receipts	d. Period Begin Balance				d. Period Begin Balance
and		·			
Expenditures	\$ 86.00				\$
CERTIFICATION					
					& 22D-22M of Chapter 163 of
	es and that no lunds are colorrect and that I have been				further certify that this report
	HENAGE	manica by morre t	The state of the s		10/30/2016
	Printed Name of Signer		ignature of Appoint	ted Treasurer	Date
FOR OFFICE USE ON	LY		^	\.	
Date Received:	10/31/2011	Employee:	KUQU	um~ I	Delivery Method
	A1 /a		-1		Normal Mail
Date Postmarked:	N/A	Employee:		J	Registered Mail Hand Delivered Electronically Filed
Date Scanned:		Employee:	**************************************	 [Signer has not received
Date Data Entered	l:	Employee:			mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Amendment No

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number	
Lee Henage for Board of Education	Quarterly-Third		LH41516	
Start of Election Cycle: January 1,	2016	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$ 86.00	\$ 0.00	
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$	
6) Contributions from Individuals	(CRO-1210)	\$ 1,755.65	\$ 1,782.65	
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$	
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 100.00	
10) Refunds/Reimbursements To the Committee	(CRO-1240)	S	\$	
11) Other Receipt Sources	(000 1050)	RECEIVI		
11a) Interest on Bank Accounts	(CRO-1250)	OCT 24 com		
11b) Contributions from Not-for-Profit Organization	-			
11c) Outside Sources of Income	(CRO-1250)	Union Co. Board of Elec	tions .	
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$	
11 e) Exempt Purchase Price Sales 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11	(CRO-1265)	\$ 1,755.65	\$ 1,882.65	
	c, 11a ana 11e)	φ 1,755.05	\$ 1,002.03	
EXPENDITURES 13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 236.20	\$ 250.20	
13b) Contributions to Candidates/Political Commi	ttees <i>(CRO-1310</i>)	\$	\$	
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$	
15) Loan Repayments	(CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$	
17) In-Kind Contributions	(CRO-1510)	\$ 1,505.65	\$ 1,532.65	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 1,741.85	\$ 1,782.85	
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	htract line 18)	\$ 99.80	\$ 99.80	
<u>ADDITIONAL INFORMATION</u>				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaig	ns) <i>(CRO-1430)</i>	\$ 100.00		
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$		
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$		
24) Account Transfers Within the Committee	(CRO-1720)	\$		
25) Administrative Support	(CRO-1710)	\$	\$	
26) Forgiven Loans	(CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$	\$	
28) Contributions to be Refunded	(CRO-1215)	\$	\$	

		m Individuals		P ₁		1 1205 :	Yes	No No
		ividual contributions o) or contributions un	der \$50 H form UKG	2. ID Num		
			oie)	Alternative displaced Construction of the Cons	er egypty ar en typical er typigar ar tre er e	Z. ID Ruo		
Lee Hena	age for Board of E	ducation					041516	
	ibutor Informatio				emove			
	ne, Mailing Address &	& Phone		b. Job Title/Profession	0	d. Comments	8	
Lee Hena	city, state, & zip)			RN				
	age acaster Hwy			c. Employer's Name/S	Snecific Field			
	NC 28112			Carolinas Medica		1		
704-290-	8339					e. Election S	um to Date	
						\$	1,532.65	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/yy	33.) T	k. Amount	
\boxtimes		Check	Filin	ng Fee Paid	6/27/1	6	\$	27.00
		Credit	Sign	is	8/12/1	16	\$	1,505.65
			T				\$	
	ibutor Informatio			Add [] Re	emove			
	ne, Mailing Address &	& Phone		b. Job Title/Profession	n	d. Comments	s	1
	city, state, & zip)			Attorney				
Kathy He	cians Lane			c. Employer's Name/S	Specific Rield	<u> </u> 		
	NC 28110			N/A	special reca			
						e, Election S	um to Date	
						\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check			09/29/	9/16 \$ 2		250.00
				AMIL A			\$	
							\$	
	ibutor Informatio				emove			
a. Full Nam	ne, Mailing Address &	がにアノドロ		b. Job Title/Profession	n	d. Comments	S	
(Incinue)		JLIVED		4				
	001	T 3 1 2016		c. Employer's Name/S	Specific Field			
	Union Co. I	Board of Elections				e, Election S	um to Date	
						\$		
f, Prior	g. Account Code	h. Form of Payment	i, In-K	Kind Description	j. Date (mm/dd/yy	yy)	k. Amount	
							\$	
							\$	
							\$	
4. Total	only this Page	e				\$	<u> </u>	1,755.65
5. Total	of ALL CRO	-1210 Pages				÷		1.755.65
ing a property of the second			3D A 1100			\$		1,755.65

Contributions from Individuals

Amendment

No :

Disbursements

 \boxtimes

No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)

2. ID Number 1

	r Board of Education		<u> </u>	The second of th	LH41516		
			CRO-1310 forms for each t	tvne of Disbursen			
Operating E	Expenses	Contributions to Ca	andidates/Political Committees		ordinated Party Expenditures		
4. Payee Inform	nation		DbA	Remove			
a. Full Name, Mail	ling Address & Phone		b. Coordinated Committee N		d. Comments		
(include city, state,	, & zip)						
Wells Fargo							
1989 Dickerson			e. Level Registered (Specify)		1		
Monroe, NC 28	8110		Federal	County:	7		
704-283-2176			State	Municipality:	e. Election Sum to Date		
					\$ 56.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Draft	0			Bank Fees		
1	Diait		Various	\$42.00			
				\$			
4. Payee Inform	nation		Add 🔲	Remove			
· · · · · · · · · · · · · · · · · · ·	ing Address & Phone		b. Coordinated Committee N		d. Comments		
(include city, state,	-		bi Cool dinated Committee 24	auc	u, Comments		
Vistaprint	се гірј		†		1		
95 Hayden Ave.	I.		c. Level Registered (Specify)				
Lexington, MA			Federal	County:			
	05.51 , , , ,		State	Municipality:	e. Election Sum to Date		
Í				winicipants.			
;	•				\$ 194.20		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
1	Debit Card	Α	10/7/16	\$119.77	Business Cards		
1	Debit Card	A	10/19/16	\$74.43	Business Cards		
4. Payee Inform	ıation		Add	Remove			
a. Fuli Name, Maiti	ing Address & Phone		b. Coordinated Committee Na		d. Comments		
(include city, state, a	& zip)	····					
<u> </u>			1	I			
	Ω ET Λ t		c. Level Registered (Specify)		1		
	MEUt	EIVED	Federal	County:	[
		•	State	Municipality:	c. Election Sum to Date		
	OCT 3	1 2016					
					\$		
f. Account Code	g. Forblion:GmeBoa	dofElections de	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
				\$			
		<u> </u>		\$			
5. Total only this					\$ 236.20		
	CRO-1310 Pages			appear to the season of the season of	1		
	line 13a of Detailed Sum			,	\$ 236.20		
			0 if Contrib to Candidates/Politic		220.20		
			0 if Coordinated Party Expenditu	res)			
7. Purpose Code A* - Media	es (List detailed exp			*** *** 4			
E - Salaries	B* - Printing F* - Equipment	C* - Fund G - Politic		D - To Anothe			
I - Postage	J - Penalties		ce Expenses		Holding Public Office Expenses Donation to Legal Expense Fund		
O* - Other			-	Q " DOUBLIOL	n to Legai Expense runu		
* Codes require	e detailed explanati	on in required re	emarks field (k)				

Outstanding Loans

				Ame	endment		
Pg	1	of	1		Yes	\boxtimes	No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

	me (and Fund if applicable)		2. ID Number
Lee Henage for Board	I Education			LH41516
3. Lender Informatio	n 🔯 A	dd	Remove	
a. Full Name, Mailing Add		-	itle/Profession	d. Comments
(include city, state, & zi	p)	RN		
Lee Henage 3859 Lancaster Hwy				e. Start Date (mm/dd/yyyy)
Monroe, NC 28112		c. Emplo	yer's Name/Specific Field	
•			nas Medical	04/21/2016
		Center		f. End Date (mm/dd/yyyy)
g. Rate	b. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance
0 %			\$ 100.00	\$ 100.00
k. Full Name of Lending I	nstitution			I. Loan Number
3. Lender Informatio	n 🗇 A	dd	Remove	
a. Full Name, Mailing Add			tle/Profession	d. Comments
(include city, state, & zi				
		- 121-		e. Start Date (mm/dd/yyyy)
		c. Empio	yer's Name/Specific Field	
				f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged		i, Original Loan Amount	j. Remaining Loan Balance
%			\$	\$
k. Full Name of Lending I	nstitution		L	l. Loan Number
				. ,
3. Lender Informatio	n 🗍 A	dd	Remove	
a. Full Name, Mailing Add			tle/Profession	d. Comments
(include city, state, & zij	o)			
) PE	CEIVED	}		e. Start Date (mm/dd/yyyy)
		c. Emplo	yer's Name/Specific Field	C Start Date (unibudy)
CC	CT 3 1 2016			
intan A	0 1 1 7 1			f. End Date (mm/dd/yyyy)
oton Go	. Board of Elections			
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance
%			\$	\$
k, Full Name of Lending In	estitution			l. Loan Number
4. Total only this Pag				\$ 100.00
5. Total of ALL CRO-1430 Pages				\$ 100.00
(This line must be on line	21 of Detailed Summary Page CR	O-1100)		Ψ 100.00

Amendment **In-Kind Contributions** In-Kind Contributions Pg 1 of 1 Ye Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund. Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days. \times

1. Committee Full Name (and Fund if applicable)				2. ID	Number	
Lee Henage for Board of Education					LH41516	
	emove	arring (A)				
a. Full Name, Mailing Address & Phone		Contribu	tor	e. Con	rments	
(include city, state, & zip)	M In	dividual				
Lee Henage	□ C	andidate				
3859 Lancaster Hwy	□ P	irty				
Monroe, NC 28112	P.	\C				
704-290-8339	R	efcrendum		d. Elec	d. Election Sum to Date	
;	Other Receipt Source			\$ 1,532.65		
e. Description		f. Date	e (mm/dd/yy	<u> </u> уу)	g. Fair Market Amount	
			08/12/16		\$ 1,505.65	
Signs			06/12/10		\$ 1,505.65	
					\$	
					\$	
3. Contributor Information Add R	emove					
a. Full Name, Mailing Address & Phone	b. Type o	Contribu	tor	c. Con	ıments	
(include city, state, & zip)	☐ In	dividual				
(include city, state, & zip) ====================================	□ c	andidate				
	P	ırty			+	
ยบที่ 3 1 2016	P.	AC				
	R	eferendum		d. Ele	ction Sum to Date	
Union Co. Board of Elections		ther Receip	ot Source			
				I Q'		
				\$		
e, Description		f. Date	e (mm/dd/yy		g. Fair Market Amount	
e. Description		f. Date	e (mm/dd/yy)		g. Fair Market Amount	
e. Description		f. Date	e (mm/dd/yy			
ę. Description		f. Dat	e (mm/dd/yy			
e. Description		f, Date	e (mm/dd/yyy		\$	
3. Contributor Information	emove				\$	
		f. Date		 yy)	\$	
3. Contributor Information	b. Type o	Contribu dividual		 yy)	\$ \$ \$	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	b. Type o	*Contribu		 yy)	\$ \$ \$	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	b. Type o	Contribu dividual andidate urty		 yy)	\$ \$ \$	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	b. Type o	Contribu dividual andidate		c. Con	\$ \$ s	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	b. Type o	Contribu dividual andidate urty AC eferendum	tor	c. Con	\$ \$ \$	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	b. Type o	Contribu dividual andidate urty AC	tor	c. Con	\$ \$ s	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone	b. Type o	Contribu dividual andidate uty AC eferendum ther Receip	tor ot Source	c. Con	\$ \$ aments ction Sum to Date	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type o	Contribu dividual andidate uty AC eferendum ther Receip	tor	c. Con	\$ sments ction Sum to Date g. Fair Market Amount	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type o	Contribu dividual andidate uty AC eferendum ther Receip	tor ot Source	c. Con	\$ \$ aments ction Sum to Date	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type o	Contribu dividual andidate uty AC eferendum ther Receip	tor ot Source	c. Con	\$ sments ction Sum to Date g. Fair Market Amount	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type o	Contribu dividual andidate uty AC eferendum ther Receip	tor ot Source	c. Con	\$ \$ sments ction Sum to Date g. Fair Market Amount \$	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type o	Contribu dividual andidate uty AC eferendum ther Receip	tor ot Source	c. Con	\$ \$ shaments ction Sum to Date g. Fair Market Amount \$ \$	
3. Contributor Information Add R a. Full Name, Mailing Address & Phone (include city, state, & zip) e. Description	b. Type o	Contribu dividual andidate uty AC eferendum ther Receip	tor ot Source	c. Con d. Elec	\$ \$ showners ction Sum to Date g. Fair Market Amount \$	

No